

Report to Determine Succession Form

All account maintenance can be completed at MyTax.Illinois.gov. Online submission provides a confirmation that your submission was received as well as eliminates the wait time associated with traditional mail or fax and in many cases can be automatically processed.

Logon to your MyTax. Illinois. gov account to submit your information:

- Select your Unemployment Insurance Account
- Under Account Maintenance select "<See All...>"
- ➤ In the expanded list select "File Additional UI Schedules"
- Click "File/Update Report to Determine Succession (Form UI-1 S&P)
- Succession information should be provided by the Successor account.
- If this is an new registration you can submit the information on your MyTax.Illinois.gov registration and select "Yes" to the questions: "Did you acquire your Illinois business or any portion of it by purchase, reorganization, or a change in entity; for example, a change from sole proprietor to corporation?"
 - To complete your registration, go to http://mytax.illinois.gov. Select the "Registration" tab on the top right corner of the page. Click the "Register a new business" hyperlink and complete the online registration.

For more information contact IDES Employer Hotline at 1-800-247-4984

Revised: March 2020

State of Illinois Department of Employment Security

33 South State Street Chicago, Illinois 60603



Report to Determine Succession

Please answer these questions carefully. Your a Unemployment Insurance contributions.	nswers may impact upon your liability for						
1 . a. Date of acquisition (or change of business entity, e.g., from a	a sole proprietorship to a corporation)						
b. Is the previous owner still doing business?	es No						
c. If No, indicate the date the previous operation ceased doing	business.						
d. If there is a gap of seven days or more between 1.a. and 1.c	., please explain; for example: seasonal business, closed						
for remodeling, or other.							
2. a. Name of previous owner							
Doing business as							
What was the previous owner's trade or business?							
What was his principal product or service?	% Sales or Receipts						
Illinois U.I. account number (if known)	Fed. I.D. Number (if known)						
Address:							
E-mail Address:							
Enter the required information for sole proprietor or each particle. Name Title Social Security No.	rtner or officer: Home Address Home Phone E-mail address						
b Name of augment augmen							
b. Name of current owner							
Doing business as							
What is your trade or business?							
What is your principal product or service?	% Sales or Receipts						
Illinois U.I. account number	Fed. I.D. Number						
Address:							
E-mail Address:							
Enter the required information for sole proprietor or each particle. Name Title Social Security No.	rtner or officer: Home Address Home Phone E-mail address						

UI-1 S&P (Rev. 3-2020) Page 1 of 4

Check all boxes that apply to you:

3.	Wha	t is the nature	of this acquisition o	r change of busi	ness entity?					
	A.	Purcha	ase of Business	Entirely	In P	art (Explain)				
	B.	Lease	of Business	Entirely	In Part	(Explain)				
	C.	Chang	je in Type of Busine	ss Entity						
		From	Sole Proprie	tor Partne	ership	Corporation	Other (Ex	plain)		
		To:	Sole Proprie	tor Partne	ership	Corporation	Other (Ex	plain)		
	D.	Corporate Ch	nange:							
		Merger o	r consolidation	Reorganization	on Issu	uance of new	corporate char	ter		
	E.	Foreclosu	ure Receiversh	nip Bankı	uptcy					
		If bankruptcy	was checked, did y	ou purchase the	assets thro	ugh federal b	ankruptcy cour	t?	Yes	No
	F.	Death of	Owner	Partner				_		_
4.	a. Dio	the former ov	vner operate at mor	e than one locat	ion in Illinois	?	Yes 1	No	If no, skip to #5.	
	b. Die	d you acquire	all of the former owr	ner's business lo	cations in III	inois?	Yes	No		
	c. Wł	nat number of	locations did you a	cquire?				_		
		st the name an ecessary):	d address of the ad	ditional Illinois b	usiness loca	tions acquire	d by you (attacl	h addit	ional sheets if	
	110	, , , , , , , , , , , , , , , , , , ,	Name and address	City/	Town	State	Zip		County	
		Location 1								
		Location 2								
		Location 3								
		Location 4								
		Location 5								
		Location 6								
5.	-		ess owned, manage		n any way b No	y the same ir	nterests that ow	ned,		
6		_	ed the former busing of the Illinois operation							
0.	_	•	nois operations that		INU	%				
		·	•	_		⁷⁰				
7		·	ns retained by previ		ula alubar di	-	day of business	-2	Voo No	
7.			all of the same peop	•		d on the last	day of business	S ? —	YesNo)
			eople were employe	a by the former (owner?					
		-	did you employ?							
_			are you employing?							
8.			former owner's ass		ire'?	_				
			etained by previous							
9.	•		of the owner's trade		0/					
		Yes No	If yes, what perc	ent?	%					
	If No.	, what did you	acquire?							

UI-1 S&P (Rev. 3-2020) Page 2 of 4

10	 Are you conducting the Illinois busin 	ess you acquired?	Yes	No	
	If No , is the former owner conducting	g the business?	Yes	No	
	If neither you nor the former owner,	who is conducting the	business?		
11	. Is this business a franchise?	Yes No			
	If Yes, did you acquire this from the	franchise	e or from the		franchisor?
					_
<u></u>	EDTIFICATION: I boroby contify that the	a information contain	ad in this rang	ort and a	ny about attached hards is true and correct
					ny sheets attached hereto is true and correct. employing enterprise. If signed by any other
pe	erson, a power of attorney must be atta	ched.			
Na	ame of Acquiring Employer				
Si	gnature		Title		
Da	ate				
If v	you should need further assistance in t		u may contac	t tha Em	aplayor Hat Lina Section at talanhana
	mber (800) 247-4984. The TTY number		•	t tile Elli	ipioyer flot Line Section at telephone

This state agency is requesting information that is necessary to accomplish the statutory purpose as outlined under 820 ILCS 405 / 100 - 3200. Disclosure of this information is **REQUIRED**. Failure to disclose this information may result in statutorily prescribed liability and sanction, including penalties and / or interest.

UI-1 S&P (Rev. 3-2020) Page 3 of 4

For a full explanation of succession, visit our web site at www.ides.state.il.us. Click on Publications and find the Guide to the Illinois Unemployment Insurance Act.

INSTRUCTIONS FOR REPORT TO DETERMINE SUCCESSION

The Department's determination as to whether you have acquired the employing enterprise of the previous owner may affect the rate at which you pay contributions.

If you are determined to be a transferee of assets of the previous owner's business, you may be obligated under the Unemployment Insurance Act for the payment of debts owed by the business.

If you purchase or lease an existing business, in whole or in part or if you change the organization of your business entity (e.g. from a partnership to a corporation, from a corporation to a proprietorship, etc.), it is required that you fill out this form.

Succession will be determined based upon several criteria. For example:

- 1. The percentage of the existing business entity that was acquired by you.
- 2. The percentage of the workers employed by the previous owner that were subsequently employed by you.
- 3. The percentage of the business assets of the previous owner acquired by you. Assets are defined as inventory, real property, machinery, accounts receivable, goodwill, etc.
- 4. Determination of succession is also based upon the amount of time that has elapsed since the previous owner ceased employing workers in Illinois and the new owner began employing workers.

The purchaser of less than substantially all of another's business may acquire a portion of that predecessor's experience under certain conditions. This transfer is optional and may be beneficial or detrimental.

UI-1 S&P (Rev. 3-2020) Page 4 of 4